FORM D

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549



FORM D

NOTICE OF SALE OF SECURITIES

IB Number:	3235-0076
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Estimated average burden

SEC USE ONLY	
Prefix	Serial
DATE RECEIVED	
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MAY 2 4 2008 PURSUANT TO REGULATION D, **SECTION 4(6), AND/OR** Washington, DC UNIFORM LIMITED OFFERING EXEMPTION

Name of Offering (check if this is an amendment and name has changed, and indicate change.))
Filing Under (Check box(es) that apply): Rule 504 Rule 505 Rule 506 Type of Filing: New Filing Annendment	☐ Section 4(6) ☑ ULPROCESSEL
A. BASIC IDENTIFICATION DATA	JUN 0 3 2008
1. Enter the information requested about the issuer Name of Issuer (check if this is an amendment and name has changed, and indicate change. HRJ Special Opportunities II (International), L.P.	THOMSON REUTE
Address of Executive Offices (Number and Street, City, State, Zip Code) 2965 Woodside Road, Woodside, CA 94062	Telephone Number (Including Area Code) (650) 327-5023
Address of Principal Business Operations (Number and Street, City, State, Zip Code) (if different from Executive Offices)	Telephone Number (Including Area Code)
Brief Description of Business Private Equity Investment	
Type of Business Organization corporation limited partnership, already formed business trust limited partnership, to be formed	(please spec 08047819
Actual or Estimated Date of Incorporation or Organization: [Enter two-letter U.S. Postal Service abbreviation for CN for Canada: FN for other foreign jurisdiction) [Seneral Instructions] [Consider two-letter U.S. Postal Service abbreviation for CN for Canada: FN for other foreign jurisdiction) [Consider two-letter U.S. Postal Service abbreviation for CN for Canada: FN for other foreign jurisdiction) [Consider two-letter U.S. Postal Service abbreviation for CN for Canada: FN for other foreign jurisdiction) [Consider two-letter U.S. Postal Service abbreviation for CN for Canada: FN for other foreign jurisdiction) [Consider two-letter U.S. Postal Service abbreviation for CN for Canada: FN for other foreign jurisdiction) [Consider two-letter U.S. Postal Service abbreviation for CN for Canada: FN for other foreign jurisdiction in the offering Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or due, on the date it was mailed by United States registered or certified mail to that address. [Conic Required: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549. [Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually photocopies of the manually signed copy or bear typed or printed signatures. [Information Required: A new filing must contain all information requested. Amendments need only report the information requested in Part C, and any material changes from the information previously supplied in Parts A the SEC. [Filing Fee: There is no federal filing fee.] [State: There is no federal filing fee.] [State: There is no federal filing fee.] [State: There is no federal filing fee.] [Consider two-letter U.S. Postal Service abbreviation for the exemption (ULOE) for sales of that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrate. It is notice shall be used to indicate reliance on the Uniform Limited Offering Exem	D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. A notice is deemed filed with the U.S. Securities and r, if received at that address after the date on which it is ally signed. Any copies not manually signed must be name of the issuer and offering, any changes thereto, the and B. Part E and the Appendix need not be filed with
be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of the ATTENTION	ils notice and must be completed.
Failure to file notice in the appropriate states will not result in a loss of the federal appropriate federal notice will not result in a loss of an available state exemption unless such	exemption. Conversely, failure to file the exemption is predicted on the filing of a federal

SEC 1972 (6-02)

notice.

Persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

		A. BASIC ID	DENTIFICATION DATA			
2. Enter the information requ	uested for the follo	wing:				
Each promoter of the	issuer, if the issuer l	has been organized within the	e past five years;			
Each beneficial owner	r having the power t	o vote or dispose, or direct th	he vote or disposition of, 10%	6 or more of a class of	f equity	securities of the issuer;
Each executive office	r and director of cor	porate issuers and of corpora	ite general and managing par	tners of partnership is	suers; a	ind
Each general and mar	naging partner of par	tnership issuers.				
Check Box(es) that Apply:	Promoter	Beneficial Owner	☐ Executive Officer	Director	⊠	General and/or Managing Partner
Full Name (Last name first, if i						
HRJ Special Opportunities I			2.1.			
Business or Residence Address 2965 Woodside Road, Woods	(nd Street, City, State, Zip ((ode)			
		[] p. c.:10		Dimeter.	1521	General and/or
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	\boxtimes	Managing Partner
Full Name (Last name first, if i	ndividual)	· · · · · · · · · · · · · · · · · · ·				
Barton, Harris						
Business or Residence Address	s (Number a	nd Street, City, State, Zip C	Code)			
2965 Woodside Road, Woods	ide, CA 94062			<u>-</u>		
Check Box(es) that Apply:	Promoter	Beneficial Owner	☐ Executive Officer	Director	☒	General and/or Managing Partner
Full Name (Last name first, if i Lott, Ronnie	ndividual)					
Business or Residence Address	(Number a	nd Street, City, State, Zip (Code)			
2965 Woodside Road, Woods			·			
Check Box(es) that Apply:	Promoter	⊠ Beneficial Owner	☐ Executive Officer	Director		General and/or Managing Partner
Full Name (Last name first, if i Lifespan Corporation	individual)					
Business or Residence Address	s (Number a	nd Street, City, State, Zip (Code)			
167 Point Street, CORO Buil		•				
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director		General and/or Managing Partner
Full Name (Last name first, if	individual)				·	
The Brood, LLC			· · · · · · · · · · · · · · · · · · ·			
Business or Residence Address	s (Number a	nd Street, City, State, Zip (Code)			
555 Bryant Street, #347, Pale	o Alto, Ca 94301					
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	☐ Executive Officer	Director		General and/or Managing Partner
Full Name (Last name first, if	individual)					
Business or Residence Address	s (Number a	nd Street, City, State, Zip C	Code)			
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director		General and/or Managing Partner
Full Name (Last name first, if	individual)					
Business or Residence Address	s (Number a	nd Street, City, State, Zip (Code)			
	(Use blan	ik sheet, or copy and use ac	Iditional copies of this shee	t, as necessary)		

					В.	INFORMA	TION ABO	OUT OFFE	RING				
1. 1	Uac the	iccupe cold	l ordone the	ianus inter	ad to call to	non morad	itad invactor	s in this offe	rino?			Yes	No ⊠
1. 1	1. Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?								*****************	٠			
2. '	2. What is the minimum investment that will be accepted from any individual?										\$	n/a	
											Yes	No	
			permit joint		-							\boxtimes	
			ition reques iilar remune										
1	person	to be listed	is an assoc	ciated perso	n or agent o	of a broker	or dealer re	gistered wit	h the SEC	and/or with	a state or		
			e of the brok set forth the					e listed are a	ssociated pe	rsons of suc	ch a broker		
			irst, if indiv		ii igi (iiai bi	ORCI OI UCAI	er only.			<u></u>			
	•	ndall S.	,	,									
Busin	ess or F	Residence /	Address (Nu	mber and St	reet, City, S	tate, Zip Co	de)						
			1, Suite 430.		ok, IL 6006	2				····			
			oker or Deal	er	•		•						
		tal Adviso ich Person	Listed Has S	Solicited or	Intends to S	olicit Purcha	asers		•	· · · · · · · · ·	·- 		
			or check indi									Па	II States
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1	LJX	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[N	/IT]	[NE]	[NV]	[NH]	[[1]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[F	U]	[SC]	[SD]	[TN]	[TX]	[ניט]	[٧٦]	[VA]	[WA]	[WV]	[WI]	[WY]	(PR)
Full N	Name (I	ast name f	irst, if indiv	idual)	<u>. </u>		<u>.</u> .						
Busin	ess or I	Residence /	Address (Nu	mber and St	reet, City, S	tate, Zip Co	de)				,		= ==
Name	of Ass	ociated Bro	oker or Deal	ег									
States	in Wh	ich Person	Listed Has S	Solicited or	Intends to S	olicit Purcha	isers			**			
(CI	heck "A	All States" o	or check indi	ividuals Stat	es)						*************	□ A	ll States
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-	, U]	[SC]	[SD]	(TN)	[TX]	[ហា]	(VT)	[VA]	[WA]	[WV]	[WI]	[WY]	(PR)
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Busin	ess or l	Residence /	Address (Nu	mber and St	treet, City, S	itate, Zip Co	ode)					•	
Name	of Ass	sociated Bro	oker or Deal	er									
States	in Wh	ich Person	Listed Has S	Solicited or	Intends to S	olicit Purch	asers			··			
			or check ind									Па	Il States
•	AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	{CT}	[DE]	[DC]	[FL]	[GA]	[НІ]	(ID)
•	L]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
_	-, ИТ]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
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	RI]	[SC]	[SD]	[1'N]	[TX]	[UI]	[V1]	[VA]	[WA]	[WV]	[WI]	[** 1]	[r iv]

(Use blank sheet, or copy and use additional copies of this sheet, as necessary)

1.	C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box \(\square\$ and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.	FPROCEEDS	
	Type of Security	Aggregate Offering Price	Amount Already Sold
	Debt	-	\$
	Equity		\$
	Common Preferred	<u> </u>	·
	Convertible Securities (including warrants)	S	s
	Partnership Interests		\$_34,692,500.00
	Other (Specify)	S	\$
	Total	\$_34,692,500.00	\$ <u>34,692,500.00</u>
	Answer also in Appendix, Column 3, if filing under ULOE.		•
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."	·	
•		Number Investors	Aggregate Dollar Amount of Purchases
	Accredited investors	41	\$ _34,692,500.00
	Non-accredited Investors		\$
	Total (for filings under Rule 504 only)		\$
	Answer also in Appendix, Column 4, if filing under ULOE.		
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1.		
	Type of Offering	Type of Security	Dollar Amount Sold
	Rule 505	-	\$
	Regulation A		\$
	-		\$
	Rule 504 Total		\$ \$
4.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		3
	Transfer Agent's Fees		\$
	Printing and Engraving Costs		\$
	Legal Fees	\boxtimes	\$ 25,000.00
	Accounting Fees		\$
	Engineering Fees		\$
	Sales Commissions (specify finders' fees separately)		\$
	Other Expenses (identify)		s
	Total		\$

b. Enter the difference between the aggregate offering price given in response to Part C Question 1 and total expenses furnished in response to Part C — Question 4.a. This difference is the "adjusted gross proceeds to the issuer." Indicate below the amount of the adjusted gross proceeds to the issuer used or proposed to be used	for	\$ 34,667,500.00
each of the purposes shown. If the amount for any purpose is not known, furnish an estimate and che the box to the left of the estimate. The total of the payments listed must equal the adjusted gross process.		
to the issuer set forth in response to Part C — Question 4.b above.	Payments to Officers, Directors & Affiliates	Payments To Others
Salaries and fees	\$	\$
Purchase of real estate	\$	S
Purchase, rental or leasing and installation of machinery and equipment	S	S
Construction or leasing of plant buildings and facilities	S	□ s
Acquisition of other businesses (including the value of securities involved in this offering that may be used in exchange for the assets or securities of another issuer pursuant to a merger)	□ S	□ \$
Repayment of indebtedness	□ s	□ s
Working capital		\$34,667,500.00
Other (specify):	s	 \$
Column Totals	□ s	\$34,667,500.00
Total Payments Listed (column totals added)	☐ \$ 34,667	.500.00

[FEDERAL SIGNATURE PAGE FOLLOWS]

D	FEDERAL	. SIGNATURE

The issuer has duly caused this notice to be signed by the undersigned duly authorized person. If this notice is filed under Rule 505, the following signature constitutes an undertaking by the issuer to furnish to the U.S. Securities and Exchange Commission, upon written request of its staff, the information furnished by the issuer to any non-accredited investor pursuant to paragraph (b)(2) of Rule 502.

Issuer (Print or Type) HRJ Special Opportunities II (International), L.P.	Signature (any) Amel	Date 5 128 108
Name of Signer (Print or Type) Cory Pavlik	Title of Signer (Print or Type) Chief Financial Officer of HRJ SO II Management HRJ Special Opportunities II Management, L.P., G	

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Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

END